Tunicia L Ross First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
uptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
56893-tjt			
			Check if this is a amended filing
	uptcy Court for the:	uptcy Court for the: EASTERN DISTRICT O	uptcy Court for the: EASTERN DISTRICT OF MICHIGAN

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 79,069.00 1c. Copy line 63, Total of all property on Schedule A/B..... 79.069.00 Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 21,974.77 Your total liabilities Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I..... 2,462.00 Schedule J: Your Expenses (Official Form 106J) 2,272.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,010.56

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debto	or 1	Tunicia L Ross				
		First Name	Middle Name	Last Name		
Debto Spous	or 2 e, if filing)	First Name	Middle Name	Last Name		
Inita	d States Ba	nkruntov Court for the	EASTERN DISTRICT OF	E MICHICAN		
Jille	a States Da	nkruptcy Court for the:	EASTERN DISTRICT OF	- WICHIGAN		
Case	number _1	15-56893-tjt				☐ Check if this is ar amended filing
Offi	cial Fo	rm 106A/B				
_		e A/B: Prop	perty			12/15
each	category, se est. Be as co	eparately list and describ complete and accurate as	e items. List an asset only on possible. If two married peop	ce. If an asset fits in more than one ble are filing together, both are equa any additional pages, write your na	lly responsible for supplying	correct information. If
Part 1:	Describe I	Each Residence, Buildin	g, Land, or Other Real Estate	You Own or Have an Interest In		
. Do y	ou own or h	ave any legal or equitabl	e interest in any residence, bu	uilding, land, or similar property?		
		, , ,	- ,,	- , , ,		
_ `	lo. Go to Part	.—-				
ЦΥ	es. Where is	s the property?				
omeo	u own, leas one else driv	ves. If you lease a vehi		hicles, whether they are registrule G: Executory Contracts and l		vehicles you own that
o yo omec . Car 	u own, leas one else driv rs, vans, tru	se, or have legal or ed	cle, also report it on Sched	ule G: Executory Contracts and l	Jnexpired Leases.	,
Oo yo omed . Car	u own, leas one else driv rs, vans, tru No res	se, or have legal or ed	cle, also report it on Sched	ule G: Executory Contracts and U	Do not deduct secured cl	aims or exemptions. Put ed claims on <i>Schedule D:</i>
oo yo omed Car	u own, leas one else driv rs, vans, tru No res Make: Model:	se, or have legal or ed	who has an interest of the property of the pro	ule G: Executory Contracts and l	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	aims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property.
o yo omec . Car 	u own, leas one else driv rs, vans, tru No res	se, or have legal or ec res. If you lease a vehi ucks, tractors, sport u	cle, also report it on Sched	es est in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put ed claims on Schedule D:
omed Call	u own, leas one else driv rs, vans, tru No res Make: Model: Year: Approximate Other inform	se, or have legal or ecves. If you lease a vehicucks, tractors, sport use mileage:	Who has an interded to be depicted as a control of the depth of the de	es est in the property? Check one.	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Oo yo omed a. Car	u own, leas one else driv rs, vans, tru No res Make: Model: Year: Approximate	se, or have legal or ecves. If you lease a vehicucks, tractors, sport use mileage:	Who has an intered Debtor 1 only Debtor 2 only At least one of	es est in the property? Check one. Debtor 2 only the debtors and another s community property	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule Dims Secured by Property. Current value of the
oo yo omed Car	u own, leas one else driv rs, vans, tru No res Make: Model: Year: Approximate Other inform	se, or have legal or ecves. If you lease a vehicucks, tractors, sport use mileage:	Who has an interest of the second of the sec	es est in the property? Check one. Debtor 2 only the debtors and another s community property	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1.00 Do not deduct secured class the amount of any secure class the	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$1.00 aims or exemptions. Put ed claims on Schedule D:
Oo yoo	wown, lease one else drivers, vans, truendre else drivers, vans, truendre else drivers else else drivers else else drivers else else else else else else else e	se, or have legal or ecves. If you lease a vehicucks, tractors, sport use mileage:	Who has an interest of the property of the pro	es est in the property? Check one. Debtor 2 only the debtors and another s community property s)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1.00 Do not deduct secured class the amount of any secure Creditors Who Have Clair Creditors Who Have Clair Creditors Who Have Clair Canada Ca	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$1.00 aims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Oo yoo	wown, lease one else drivers, vans, truendre else drivers, vans, truendre else drivers else else drivers else else else else else else else e	ee, or have legal or ecves. If you lease a vehicucks, tractors, sport use mileage:	Who has an interded by the least one of	es est in the property? Check one. Debtor 2 only the debtors and another s community property s) est in the property? Check one.	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1.00 Do not deduct secured class the amount of any secure class the	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$1.00 aims or exemptions. Put ed claims on Schedule D:
Oo yoo	wown, lease one else drivers, vans, truendre else drivers, vans, truendre else drivers, vans, truendre else drivers else else drivers else else else else else else else e	se, or have legal or ecres. If you lease a vehicucks, tractors, sport use mileage: experimental	Who has an interded by the last one of the las	es est in the property? Check one. Debtor 2 only the debtors and another s community property s) est in the property? Check one.	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$1.00 aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the
Oo yoo	wown, lease one else drivers, vans, truendre else drivers, vans, truendre else drivers, vans, truendre else drivers else else drivers else else else else else else else e	se, or have legal or ecres. If you lease a vehicucks, tractors, sport use mileage: experimental	Who has an interded by the last one of the las	es est in the property? Check one. Debtor 2 only the debtors and another s community property s) est in the property? Check one.	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$1.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$1.00 aims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the

Official Form 106A/B

Schedule A/B: Property

D	ebtor 1	Tunicia L Ro	Case nui	mber (if known)	15-56893-tjt
5			the portion you own for all of your entries from Part 2, including any ent ed for Part 2. Write that number here		\$3,001.00
Pa	art 3: Des	scribe Your Persor	nal and Household Items		
D	o you ow	n or have any le	egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and f es: Major applian	urnishings ices, furniture, linens, china, kitchenware		
	Yes.	Describe			
			Household furnishings		\$5,000.00
7.	■ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scaphones, cameras, media players, games	anners; music	collections; electronic devices
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objections, memorabilia, collectibles	cts; stamp, coi	n, or baseball card collections;
9.	Example No	musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf club	s, skis; canoes	and kayaks; carpentry tools;
10	. Firearm Examp ■ No		s, shotguns, ammunition, and related equipment		
11	□ No		othes, furs, leather coats, designer wear, shoes, accessories Wardrobe		\$2,000.00
12	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, w Jewelry	atches, gems,	gold, silver
13	Examp ■ No	rm animals bles: Dogs, cats, Describe	birds, horses		
14	■ No	ner personal and	d household items you did not already list, including any health aids you ormation	did not list	

Schedule A/B: Property Official Form 106A/B page 2

Debt	or 1	Tunicia L Ross	Case number (if known)	15-56893-tjt	
		he dollar value of all of your entries from Part 3, including any en irt 3. Write that number here		\$7,800.00	
Part 4	: Des	scribe Your Financial Assets			
Do y	ou ow	n or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.	
	Examp No	oles: Money you have in your wallet, in your home, in a safe deposit bo		ion	
<i>I</i>		ts of money les: Checking, savings, or other financial accounts; certificates of dep institutions. If you have multiple accounts with the same institutio		houses, and other similar	
		Institution name:			
		17.1. Checking acco	ount @ Citizens Bank	\$80.00	
		17.2. Checking acco	ount @ UofM CU	\$0.00	
_		ablicly traded stock and interests in incorporated and unincorporated	ated businesses, including an intere	st in an LLC, partnership,	
		Give specific information about them Name of entity:	% of ownership:		
 -	Negotia	ment and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promisso egotiable instruments are those you cannot transfer to someone by significant instruments.	ry notes, and money orders.		
		Give specific information about them Issuer name:			
	Exampi No	nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings acc	ounts, or other pension or profit-sharing	g plans	
	Yes. L	List each account separately. Type of account: Institution name: TIAA Cref		\$68,187.00	
`	Your sh	y deposits and prepayments nare of all unused deposits you have made so that you may continue eles: Agreements with landlords, prepaid rent, public utilities (electric, g		anies, or others	
	No Yes	Institution name of	or individual:		
23. A		es (A contract for a periodic payment of money to you, either for life of	r for a number of years)		
	Vec	Issuer name and description.			

Schedule A/B: Property Official Form 106A/B page 3

De	ebtor 1	Tunicia L	Koss		Case number (if known) 1	5-56893-tjt
24.	26 U.S.C		ation IRA, in an account in a qu 1), 529A(b), and 529(b)(1).	ualified ABLE program, or ι	under a qualified state tuition progr	am.
	■ No □ Yes		Institution name and description	. Separately file the records of	of any interests.11 U.S.C. § 521(c):	
25.	Trusts,	equitable or	future interests in property (of	ther than anything listed in	line 1), and rights or powers exerci	sable for your benefit
		Give specific	information about them			
	Example ■ No	les: Internet o	, trademarks, trade secrets, and domain names, websites, proceed information about them			
	License	s, franchise	es, and other general intangible		liquor licenses, professional licenses	
	■ No		information about them	oranio according norm norm ngo,	inquel inconces, professional inconces	
M	onev or n	roperty owe	ed to you?			Current value of the
	oney or p	noperty one				portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to	o you			
	■ No □ Yes. 0	Give specific	information about them, including	g whether you already filed th	ne returns and the tax years	
	■ No	les: Past due	or lump sum alimony, spousal so	upport, child support, mainter	nance, divorce settlement, property se	ettlement
	Example No	les: Unpaid w benefits;	unpaid loans you made to some		pay, vacation pay, workers' compensa	ation, Social Security
	□ Yes.	Give specific	information			
31.		s in insuran les: Health, d		savings account (HSA); cred	dit, homeowner's, or renter's insurance	
	Yes. N	Name the ins	urance company of each policy a Company name:	nd list its value.	Beneficiary:	Surrender or refund
			Through employer			value: \$1.00
	If you a someor ■ No	re the benefi ne has died.	perty that is due you from some ciary of a living trust, expect proc		olicy, or are currently entitled to receive	e property because
33.			d parties, whether or not you has, employment disputes, insurance		a demand for payment	
		Describe eac	ch claim			
34.	■ No	_	nd unliquidated claims of every	nature, including counterd	claims of the debtor and rights to so	et off claims
Of		m 106A/B		Schedule A/B: Property		page 4

Best Case Bankruptcy

Deb	tor 1	Tunicia L Ross		Case number (if known)	15-56893-tjt
		ancial assets you did not already list			
	No Yes.	Give specific information			
36.		he dollar value of all of your entries from Part 4, including the description of the desc			\$68,268.00
Part :	5: Des	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real estate	e in Part 1.	
	-	wn or have any legal or equitable interest in any business-related	d property?		
_		to Part 6.			
	Yes. G	o to line 38.			
Part (scribe Any Farm- and Commercial Fishing-Related Property You out or have an interest in farmland, list it in Part 1.	Own or Have an Interest	ln.	
46. [Do you	own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
Part [*]	7: Des	scribe All Property You Own or Have an Interest in That You Did I	Not List Above		
	Examp	have other property of any kind you did not already list les: Season tickets, country club membership	?		
_	No	Other and a sife to form a few			
	ı yes. (Give specific information			
54.	Add ti	ne dollar value of all of your entries from Part 7. Write the	nat number here		\$0.00
Part 8	8: List	the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.		: Total vehicles, line 5	\$3,001.00		<u> </u>
		: Total personal and household items, line 15	\$7,800.00		
		: Total financial assets, line 36	\$68,268.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$79,069.00	Copy personal property to	stal \$79,069.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$79,069.00

Schedule A/B: Property Official Form 106A/B page 5

Fill in this information to identify your case:					
Debtor 1	Tunicia L Ross				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	OF MICHIGAN		
Case number	15-56893-tjt				
(if known)	10 00000 tjt				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		unt of the exemption you claim	Specific laws that allow exemption
2015 Chevy Cruze Line from Schedule A/B: 3.1	\$1.00	■ .	\$1.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
2003 Hyundia Elantra Line from <i>Schedule A/B</i> : 3.2	\$3,000.00	■ .	\$3,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Household furnishings Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Wardrobe Line from Schedule A/B: 11.1	\$2,000.00	= .	\$2,000.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Jewelry Line from Schedule A/B: 12.1	\$800.00	= _	\$800.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)

Debtor 1	I UNICIA L ROSS		Case number (if known)	15-56893-tjt		
	ef description of the property and line on needule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only o	ne box for each exemption.		
	ecking account @ Citizens Bank e from Schedule A/B: 17.1	\$80.00	•	\$80.00	11 U.S.C. § 522(d)(5)	
				of fair market value, up to oplicable statutory limit		
	AA Cref e from Schedule A/B: 21.1	\$68,187.00	.	100%	11 U.S.C. § 522(d)(12)	
Liii	o nom concaule / v.b. = · · ·		☐ 100% of fair market value, up to any applicable statutory limit			
	rough employer e from Schedule A/B: 31.1	\$1.00		100%	11 U.S.C. § 522(d)(7)	
LIII	e Hotti Schedule A/B. 31.1			of fair market value, up to oplicable statutory limit		
	e you claiming a homestead exemption bject to adjustment on 4/01/16 and every No Yes. Did you acquire the property cover	3 years after that for ca	ases filed on o	,	,	
	□ No □ Yes					

Fill in this information to identify your case:					
Debtor 1	Tunicia L Ross				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN		
Case number	15-56893-tjt				
(if known)					☐ Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Cill in 4	ikia information to identify you						
	this information to identify you	case.					
Debtor	1 Tunicia L Ross First Name	Middle Name	Last Name				
Debtor	2						
(Spouse i	f, filing) First Name	Middle Name	Last Name				
United	States Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN				
Case n	umber 15-56893-tjt						
(if known)					☐ Che	ck if thi	s is an
					ame	ended fi	ling
Offici	al Form 106E/F						
	edule E/F: Creditors	Who Have Un	secured Cla	aims			12/15
any exec Schedule D: Credit the Conti number (Part 1:	mplete and accurate as possible. Usuatory contracts or unexpired leases e G: Executory Contracts and Unexpitors Who Have Claims Secured by Pinuation Page to this page. If you hat (if known). List All of Your PRIORITY UDO any creditors have priority unsecuted.	that could result in a claim. bired Leases (Official Form 1 roperty. If more space is ne- ve no information to report nsecured Claims	Also list executory 06G). Do not include eded, copy the Part y	contracts on Schedule A/B: Propert any creditors with partially secured ou need, fill it out, number the entri	y (Official Fo d claims that es in the box	rm 106A are liste es on th	VB) and on ed in Schedule ee left. Attach
ı	No. Go to Part 2.						
ı	□ Yes.						
Part 2:		TY Unsecured Claims					
3. [Do any creditors have nonpriority ur	nsecured claims against you	?				
Ī	\square No. You have nothing to report in th	is part. Submit this form to the	e court with your other	schedules.			
I	Yes.						
	i-4 -11 -4	d alaima in tha alababataal					
t t	List all of your nonpriority unsecure unsecured claim, list the creditor separ than one creditor holds a particular clain Part 2.	ately for each claim. For each	claim listed, identify w	hat type of claim it is. Do not list claim	s already inclu	uded in F	Part 1. If more
	uit E.				T	otal clai	im
4.1	*Capital One	Last 4 digits	of account number	1234		\$	5,155.70
	Priority Creditor's Name PO Box 6492		e debt incurred?	2012	_		
	Number Street City State Zlp Code		you file, the claim is	s: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingen					
	■ Debtor 1 only	☐ Conlingen	L				
	☐ Debtor 2 only	☐ Unliquidate	ed				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and ar	T	PRIORITY unsecured	claim:			
	☐ Check if this claim is for a comdebt		ans				
	Is the claim subject to offset?	Obligations not report as p		ration agreement or divorce that you d	id		
	■ No	☐ Debts to p	ension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Spe	ecify Credit	card purchases			
4.2	AT&T Mobility	Last 4 digits	of account number	3358		\$	928.79
	Priority Creditor's Name P.O. Box 5093 Carol Stream, IL 60197	When was th	e debt incurred?	2013	_		
	Number Street City State Zlp Code	As of the date	you file, the claim is	s: Check all that apply			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 4

Debtor	1 Tunicia L Ross		Case number (if know)	15-56893-tjt	
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	g			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that vo	ou did	
		not report as priority claims	,		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Cellul	ar provider		
4.3	Car Care One	Last 4 digits of account number	9653	\$ 1,838.04	ļ
	Priority Creditor's Name	When we the debt in some 10	2045		_
	SynchronyBank P.O. Box 960061	When was the debt incurred?	2015		
	Orlando, FL 32896				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that yo	ou did	
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit	card purchases		
4.4	JB Robinson	Last 4 digits of account number	3189	\$ 4,072.9 2	
	Priority Creditor's Name	-			_
	P.O. Box 740425 Cincinnati, OH 45274	When was the debt incurred?	2014		
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that yo	ou did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Credit	card purchases		
4.5	Lane Bryant	Last 4 digits of account number	1376	\$ 101.18	
	Priority Creditor's Name	_		<u> </u>	_
	P.O. Box 659728 San Antonio, TX 78265-9728	When was the debt incurred?	2015		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 4

Debtor	1 Tunicia L Ross		Case number (if know)	15-56893-tjt	
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that	you did	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Credit	card purchases		
4.6	University of Michigan C.U.	Last 4 digits of account number	0902	\$	8,539.84
	Priority Creditor's Name P.O. Box 7850	When was the debt incurred?	2013		
	Ann Arbor, MI 48107 Number Street City State Zlp Code	As of the date you file, the claim i	Chook all that apply		
			5. Спеск ан тасарру		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated			
	_	— Onliquidated			
	Debtor 1 and Debtor 2 only	Disputed	l alaine.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i ciaim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that	you did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Credit	card purchases and Lo	oan	
4.7	Valero	Last 4 digits of account number	7127	\$	350.00
	Priority Creditor's Name PO Box 300	When was the debt incurred?	2013		
	Amarillo, TX 79105-0300	when was the dept incurred:	2013		
-	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	ration agreement or divorce that	you did	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Gas c	ard		
4.8	Walmart Synchrony Bank	Last 4 digits of account number	6207	\$	988.30
	Priority Creditor's Name PO Box 530927 Atlanta GA 30353 0937	When was the debt incurred?	2015		
	Atlanta, GA 30353-0927 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 4

Debtor 1	Tunicia L	Ross		Case r	number (if know)	15-56893-tjt	
w	ho incurred t	he debt? Check one.	☐ Contingent				
	Debtor 1 only	/	G				
	Debtor 2 only	/	☐ Unliquidated				
	Debtor 1 and	Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecured	claim:			
	Check if this	s claim is for a community	☐ Student loans				
		oject to offset?	☐ Obligations arising out of a separ not report as priority claims	ation agree	ement or divorce tha	t you did	
	No		☐ Debts to pension or profit-sharing	g plans, and	d other similar debts		
] Yes		Other. Specify Credit	card pu	ırchases		
Part 3:	List Others	s to Be Notified About a De	ebt That You Already Listed				
-		r 2, do not fill out or submit thi	is page.				
P.O. Box	Credit Ser			□ Part 1	1: Creditors with	iginal creditor? Priority Unsecu Nonpriority Uns	red Claims
Sunrise P.O. Box	Credit Ser		Line 4.2 of (Check one):	□ Part 1 ■ Part 2	1: Creditors with	Priority Unsecu	red Claims
Sunrise P.O. Box Farming	Credit Ser k 9100 dale, NY 1		Line 4.2 of (Check one): Last 4 digits of account num	□ Part 1 ■ Part 2	1: Creditors with	Priority Unsecu	red Claims
Sunrise P.O. Box Farming Part 4:	Credit Ser (9100 (9100 () dale, NY 1	1735 nounts for Each Type of U	Line 4.2 of (Check one): Last 4 digits of account num	□ Part 1 ■ Part 2 ber	1: Creditors with 2: Creditors with	Priority Unsecu Nonpriority Uns	red Claims ecured Claims
Sunrise P.O. Box Farming Part 4:	Credit Ser (9100 (dale, NY 1 Add the And amounts of cured claim.	1735 nounts for Each Type of Usertain types of unsecured clai	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r	□ Part 1 ■ Part 2 ber reporting p	1: Creditors with 2: Creditors with ourposes only. 28 U	Priority Unsecu Nonpriority Uns	red Claims ecured Claims
Sunrise P.O. Bo) Farming Part 4: . Total the of unsec	Credit Ser (9100 Idale, NY 1 Add the And amounts of cured claim.	1735 nounts for Each Type of U	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r	□ Part 1 ■ Part 2 ber	1: Creditors with 2: Creditors with purposes only. 28 U	Priority Unsecu Nonpriority Uns	red Claims ecured Claims
Sunrise P.O. Bo) Farming Part 4: . Total the of unsec	Credit Ser (9100 (dale, NY 1 Add the An amounts of cured claim.	1735 nounts for Each Type of Usertain types of unsecured clai	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r	□ Part 1 ■ Part 2 ber reporting p	1: Creditors with 2: Creditors with ourposes only. 28 U	Priority Unsecu Nonpriority Uns	red Claims ecured Claims
Sunrise P.O. Box Farming Part 4: . Total the of unsect	Credit Ser (9100 (dale, NY 1 Add the An amounts of cured claim.	nounts for Each Type of Usertain types of unsecured clair Domestic support obligations Taxes and certain other debts Claims for death or personal	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated	□ Part 1 ■ Part 2 ber eporting p 6a. 6b. 6c.	1: Creditors with 2: Creditors with ourposes only. 28 U	Priority Unsecu Nonpriority Uns .s.c. §159. Add the	red Claims ecured Claims
Sunrise P.O. Box Farming Part 4: . Total the of unsect	Credit Ser (9100 (dale, NY 1 Add the An e amounts of cured claim.	nounts for Each Type of Usertain types of unsecured clair Domestic support obligations Taxes and certain other debts Claims for death or personal	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s	□ Part 1 ■ Part 2 ber eporting p 6a. 6b.	1: Creditors with 2: Creditors with courposes only. 28 U Total claim \$	Priority Unsecu Nonpriority Uns .s.c. §159. Add the	red Claims ecured Claims
Sunrise P.O. Box Farming Part 4: . Total the of unsect	Credit Ser k 9100 dale, NY 1 Add the An amounts of cured claim. 6a. 1 6b. 6c. 6d.	nounts for Each Type of Usertain types of unsecured clair Domestic support obligations Taxes and certain other debts Claims for death or personal	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated secured claims. Write that amount here.	□ Part 1 ■ Part 2 ber eporting p 6a. 6b. 6c.	1: Creditors with 2: Creditors with purposes only. 28 U Total claim \$ \$ \$	Priority Unsecu Nonpriority Uns .s.c. §159. Add the	red Claims ecured Claims
Sunrise P.O. Box Farming Part 4: . Total the of unsect	Credit Ser k 9100 dale, NY 1 Add the An amounts of cured claim. 6a. 1 6b. 6c. 6d.	nounts for Each Type of U certain types of unsecured clai Domestic support obligations Taxes and certain other debts Claims for death or personal Other. Add all other priority uns	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated secured claims. Write that amount here.	Part 1 ■ Part 2 ber eporting p 6a. 6b. 6c. 6d.	1: Creditors with 2: Creditors with Durposes only. 28 U Total claim \$ \$ \$ \$ \$	Priority Unsecu Nonpriority Uns S.C. §159. Add the 0.00 0.00 0.00 0.00	red Claims ecured Claims
Sunrise P.O. Box Farming Part 4: . Total the of unsect	Credit Ser k 9100 dale, NY 1 Add the An amounts of cured claim. 6a. 1 6b. 6c. 6d.	nounts for Each Type of U certain types of unsecured clai Domestic support obligations Taxes and certain other debts Claims for death or personal Other. Add all other priority uns	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated secured claims. Write that amount here.	Part 1 ■ Part 2 ber eporting p 6a. 6b. 6c. 6d.	1: Creditors with 2: Creditors with Durposes only. 28 U Total claim \$ \$ \$ \$	Priority Unsecu Nonpriority Uns S.C. §159. Add the 0.00 0.00 0.00 0.00	red Claims ecured Claims
Sunrise P.O. Box Farming Part 4: . Total the of unsect	Credit Ser x 9100 Idale, NY 1 Add the An amounts of cured claim. 6a. 6b. 6c. 6d. 6e. 6f.	nounts for Each Type of Usertain types of unsecured clair Domestic support obligations Taxes and certain other debts Claims for death or personal Other. Add all other priority unsecured. Total. Add lines 6a through 6d. Student loans Obligations arising out of a secure content.	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated secured claims. Write that amount here.	Part 1 ■ Part 2 ber eporting p 6a. 6b. 6c. 6d. 6e. 6f.	1: Creditors with 2: Creditors with Durposes only. 28 U Total claim \$ \$ Total Claim \$	Priority Unsecu Nonpriority Uns S.C. §159. Add the 0.00 0.00 0.00 0.00 0.00	red Claims ecured Claims
Sunrise P.O. Boy Farming Part 4: Total the of unsect Total claim from Part	Credit Ser k 9100 dale, NY 1 Add the An amounts of cured claim. 6a. 6b. 6c. 6d. 6e. 6f. 6s. 2 6g.	nounts for Each Type of U certain types of unsecured clai Domestic support obligations Taxes and certain other debts Claims for death or personal Other. Add all other priority uns Total. Add lines 6a through 6d. Student loans Obligations arising out of a s did not report as priority clain	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated secured claims. Write that amount here.	Part 1 ■ Part 2 ber eporting p 6a. 6b. 6c. 6d. 6e. 6f.	Creditors with Creditors with Creditors with Courposes only. 28 U Total claim \$ \$ Total Claim \$ \$ \$ Total Claim \$	Priority Unsecu Nonpriority Uns S.C. §159. Add the 0.00 0.00 0.00 0.00 0.00 0.00	red Claims ecured Claims
Sunrise P.O. Boy Farming Part 4: Total the of unsect Total claim from Part	Credit Ser x 9100 dale, NY 1 Add the And amounts of cured claim. 6a. 6b. 6c. 6d. 6e.	nounts for Each Type of U certain types of unsecured clai Domestic support obligations Taxes and certain other debts Claims for death or personal Other. Add all other priority uns Total. Add lines 6a through 6d. Student loans Obligations arising out of a s did not report as priority clain Debts to pension or profit-sh	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated secured claims. Write that amount here.	□ Part 1 ■ Part 2 ber eporting p 6a. 6b. 6c. 6d. 6e. 6f. ou 6g. 6h.	1: Creditors with 2: Creditors with Durposes only. 28 U Total claim \$ \$ Total Claim \$	Priority Unsecu Nonpriority Uns S.C. §159. Add the 0.00 0.00 0.00 0.00 0.00	red Claims ecured Claims
Sunrise P.O. Boy Farming Part 4: Total the of unsect Total claim from Part	Credit Ser (9100) (dale, NY 1) Add the An amounts of cured claim. 6a. 6b. 6c. 6d. 6e. 6f. 6s. 2 6g. 6h.	nounts for Each Type of U certain types of unsecured clai Domestic support obligations Taxes and certain other debts Claims for death or personal Other. Add all other priority uns Total. Add lines 6a through 6d. Student loans Obligations arising out of a s did not report as priority clain Debts to pension or profit-sh	Line 4.2 of (Check one): Last 4 digits of account num nsecured Claim ims. This information is for statistical r s s you owe the government injury while you were intoxicated secured claims. Write that amount here.	■ Part 2 ■ Part 2 ber 6a. 6b. 6c. 6d. 6e. 6f. ou 6g. 6h.	1: Creditors with 2: Creditors with Durposes only. 28 U Total claim \$ \$ Total Claim \$ \$ \$ * * * * * * * * * *	Priority Unsecu Nonpriority Uns S.C. §159. Add the 0.00 0.00 0.00 0.00 0.00 0.00 0.00	red Claims ecured Claims

Fill in this information to identify your case:						
Debtor 1	Tunicia L Ross					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN			
Case number	15-56893-tjt					
(if known)						Check if this is an
						amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	GM Financial PO Box 183834 Arlington, TX 76096	2015 Chevy Cruze
2.2	Wellesley Townhouses Co-Op 3566 Smith Romulus, MI 48174	Rent, \$549.00

Fill in this	information to identify your	case:		
Debtor 1	Tunicia L Ross			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filir	ng) First Name	Middle Name	Last Name	
United Star	tes Bankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN	
Case numb	ber 15-56893-tjt			☐ Check if this is an amended filing
Sched Codebtors		re also liable for any de		12/15 as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page,
	nd number the entries in the and case number (if known)			to this page. On the top of any Additional Pages, write
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.
■ No □ Yes	3			
Arizona No.	hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. s. Did your spouse, former spouse.	Nevada, New Mexico, Po	uerto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
in line Form fill out	e 2 again as a codebtor only i 106D), Schedule E/F (Official t Column 2. Column 1: Your codebtor	f that person is a guara Form 106E/F), or Sched	ntor or cosigner. Make	r if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the debt
r	Name, Number, Street, City, State and ZI	P Code		Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street	State	ZID Codo	_
	City	State	ZIP Code	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	_

Fill	in this information to identify your c								
	otor 1 Tunicia L Ro								
Del	otor 2 ouse, if filing)	Jas			_				
	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF MICHIGAN						
Cas	15-56893-tjt					eck if this is: An amende A suppleme	d filing	postpetition	chapter
O	fficial Form 106l							lowing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	spouse i de infor	is living wi	th you, incl out your sp	lude inform ouse. If mo	nation about re space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			☐ Emplo	•		
	employers.	Occupation	Maintenance/Cu	stodiar	<u>1</u>				
	Include part-time, seasonal, or self-employed work.	Employer's name	University of Mic	higan					
	Occupation may include student or homemaker, if it applies.	Employer's address	Payroll Office, G Tower Ann Arbor, MI 48						
		How long employed the	here? 26 years	3					
Par	t 2: Give Details About Mo	nthly Income							
spou If yo	mate monthly income as of the duse unless you are separated. but or your non-filing spouse have mee space, attach a separate sheet to	ore than one employer, co	, 3		, .	·		,	J
					For Do	ebtor 1	For Debt	or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,349.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	349.00	\$	N/A	

Debtor 1 Tunicia L Ross 15-56893-tjt Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 3.349.00 \$ N/A List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 636.00 N/A 5b. Mandatory contributions for retirement plans 5b. 0.00 N/A Voluntary contributions for retirement plans 5c. 5c. 0.00 N/A 5d. Required repayments of retirement fund loans 5d. 0.00 N/A 5e. Insurance 5e. 413.00 N/A 0.00 5f. **Domestic support obligations** 5f. N/A 5q. Union dues 5q. \$ \$ 44.00 N/A 5h. Other deductions. Specify: Parking 5h.+ \$ 6.00 \$ N/A Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,099.00 N/A 7. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$ 2,250.00 \$ N/A List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 8a. \$ N/A monthly net income. 0.00 8h. Interest and dividends 8h. \$ \$ 0.00 N/A 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 N/A 8d. **Unemployment compensation** 8d. 0.00 N/A 8e. **Social Security** 8e. 0.00 N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$ 0.00 \$ N/A 8g. 8g. Pension or retirement income \$ \$ 0.00 N/A Other monthly income. Specify: Income Taxes (Oro Rata) 8h.+ \$ \$ 8h. 212.00 N/A \$ Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 212.00 N/A 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 2,462.00 \$ N/A \$ 2,462.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2,462.00 12. applies

13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

Combined monthly income

Fill in this in	nformation to identify yo	our case:					
Debtor 1	Tunicia L Ro				Check	c if this is:	
Debtor 2					_	An amended filing	wing postpetition chapter
(Spouse, if fil	ling)						the following date:
United States	s Bankruptcy Court for the:	EASTER	RN DISTRICT OF MICHIG	GAN	<u> </u>	MM / DD / YYYY	
Case number	r 15-56893-tjt						
(If known)							
Officia	l Form 106J						
Sched	lule J: Your	Expen	ses				12/
information number (if Part 1:		eded, attac y question	If two married people and the short sheet to this .				
■ No	. Go to line 2.		to have shald?				
L Yes	s. Does Debtor 2 live No Yes. Debtor 2 mus		al Form 106J-2, <i>Expense</i> s	s for Separate Housel	nold of Debt	or 2.	
2. Do vo	u have dependents?	□ No	. ,	·			
Do no	t list Debtor 1 ebtor 2.	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Do no	t state the						□ No
	dents names.			Son		19	■ Yes
							□ No
							☐ Yes ☐ No
							□ No □ Yes
							□ No
							☐ Yes
expen	ur expenses include nses of people other t elf and your depende		• •				
Estimate y	as of a date after the l	our bankru	r Expenses ptcy filing date unless y is filed. If this is a supp				
	of such assistance an		overnment assistance i luded it on <i>Schedule I:</i> `			Your exp	enses
	ental or home owners ents and any rent for th		ses for your residence. I	nclude first mortgage	4. \$		549.00
. ,	included in line 4:	. g. 2 a. i a 0 i					
4a.	Real estate taxes				42 ¢		0.00
	Property, homeowner's	s, or renter's	s insurance		4a. \$ 4b. \$	-	0.00
	Home maintenance, re				4c. \$		0.00
4d.	Homeowner's associat	ion or cond	ominium dues		4d. \$		0.00
5. Additi	ional mortgage payme	ents for you	ur residence, such as ho	me equity loans	5. \$		0.00

Official Form 106J

Deb	otor 1 Tunicia	a L Ross	Case num	ber (if known)	15-56893-tjt
6.	Utilities:				
٥.		ty, heat, natural gas	6a.	\$	80.00
		ewer, garbage collection	6b.	\$	0.00
		ne, cell phone, Internet, satellite, and cable services	6c.		260.00
	6d. Other. S	pecify:	6d.	\$	0.00
		sekeeping supplies	7.	\$	250.00
		children's education costs	8.	· —	0.00
		ndry, and dry cleaning	9.		35.00
		products and services	10.	· · · · · · · · · · · · · · · · · · ·	30.00
		lental expenses	11.	· · · · · · · · · · · · · · · · · · ·	40.00
		n. Include gas, maintenance, bus or train fare.		<u> </u>	40.00
	Do not include		12.	\$	225.00
3.		t, clubs, recreation, newspapers, magazines, and books	13.	\$	85.00
		ntributions and religious donations	14.	·	40.00
	Insurance.			<u> </u>	10.00
٠.		insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insu		15a.	\$	0.00
	15b. Health in	nsurance	15b.		0.00
	15c. Vehicle i		15c.		279.00
		surance. Specify:	15d.		0.00
6		include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Specify:		16.	\$	0.00
7.		lease payments: ments for Vehicle 1	17a.	\$	399.00
		ments for Vehicle 2	17b.	·	0.00
	17c. Other. S	no oif u	176. 17c.	*	0.00
	17d. Other. S		17d. 17d.	· ·	0.00
0				Φ	0.00
ο.		ts of alimony, maintenance, and support that you did not report a n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I		\$	0.00
9		its you make to support others who do not live with you.	<i>)</i> -	\$	0.00
٠.	Specify:	no you make to support outsite who do not into man your	19.	<u> </u>	0.00
n	· · ·	perty expenses not included in lines 4 or 5 of this form or on Sc		our Income	
٠.		es on other property	20a.		0.00
	20b. Real est		20b.		0.00
		r, homeowner's, or renter's insurance	20c.	· · · · · · · · · · · · · · · · · · ·	0.00
			20d.	-	
		ance, repair, and upkeep expenses			0.00
		vner's association or condominium dues	20e.	·	0.00
1.	Other: Specify	<u> </u>	21.	+\$	0.00
22.		r monthly expenses			
	22a. Add lines	•		\$	2,272.00
	22b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
	22c. Add line 2	22a and 22b. The result is your monthly expenses.		\$	2,272.00
23.	Calculate you	r monthly net income.			
	23a. Copy line	e 12 (your combined monthly income) from Schedule I.	23a.	\$	2,462.00
	23b. Copy yo	ur monthly expenses from line 22c above.	23b.	-\$	2,272.00
	23c. Subtract	your monthly expenses from your monthly income.			
		It is your monthly net income.	23c.	\$	190.00
24.	For example, do modification to the	t an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you e terms of your mortgage?			se or decrease because of a
	■ No.				
	☐ Yes.	Explain here:			

Official Form 106J

Fill in this info				
Debtor 1	Tunicia L Ross			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
Case number	15-56893-tit			
(if known)				☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an atto	rney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the sun that they are true and correct. X /s/ Tunicia L Ross	x
Tunicia L Ross Signature of Debtor 1	Signature of Debtor 2
Date November 19, 2015	Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in t	nis inforn	nation to identify you	r case:			
Debtor	1	Tunicia L Ross				
Dobtor	2	First Name	Middle Name	Last Name		
Debtor : (Spouse if		First Name	Middle Name	Last Name		
United :	States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case no	umher 1	5-56893-tjt				
(if known)		J-30093-tjt				heck if this is an
					a	mended filing
State Be as co	ement omplete a tion. If m	nd accurate as possi	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup y additional pages, write yo	
Part 1:	Give D	etails About Your Ma	rital Status and Where You	ı Lived Before		
1. Wh	at is your	current marital statu	ıs?			
	Married					
	Not mar	ried				
2. Dui			lived anywhere other than	where you live now?		
2. Du	inig the it	ist 5 years, nave you	iived arrywriere other than	where you live now:		
	No Yes. Lis	t all of the places you	ived in the last 3 years. Do n	ot include where you live no	v.	
De	ebtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					nity property state or territorico, Texas, Washington and V	
	No Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fill	in the tota	I amount of income yo	nployment or from operatir u received from all jobs and have income that you receiv	all businesses, including par		ndar years?
	No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
			■ Wages, commissions, bonuses, tips	\$29,737.41	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Wellesley Townhouses Co-Op 3566 Smith Romulus, MI 48174	Monthly Rental Payments	\$1,647.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

15-56893-tjt

Official Form 107

Debtor 1

Tunicia L Ross

	Tunicia L Ross	Case number (if known	η 13-30693-tjt
Part 5:	List Certain Gifts and Contribution	s	
3. With ■	hin 2 years before you filed for bank No Yes. Fill in the details for each gift.	uptcy, did you give any gifts with a total value of more than \$6	600 per person?
Gif	ts with a total value of more than \$6	0 Describe the gifts Date	es you gave Value
	person	G .	gifts
	rson to Whom You Gave the Gift an dress:		
4. With	No	uptcy, did you give any gifts or contributions with a total valu	e of more than \$600 to any charity
	Yes. Fill in the details for each gift or	ontribution.	
mo Cha	ts or contributions to charities that bre than \$600 arity's Name dress (Number, Street, City, State and ZIP Co	cont	es you Value tributed
	ange Street Church of God and ophecy	tithe, \$40.00 per month mor	nthly \$40.00
	hin 1 year before you filed for bankr aster, or gambling?	ptcy or since you filed for bankruptcy, did you lose anything k	because of theft, fire, other
5. With disa		Describe any insurance coverage for the loss Include the amount that insurance has paid. List Date loss	e of your Value of propert
5. With disa □ Des	No Yes. Fill in the details. scribe the property you lost and	Describe any insurance coverage for the loss Date	e of your Value of propert
5. With disa	No Yes. Fill in the details. scribe the property you lost and w the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	e of your Value of propert
5. With disa Des hove Part 7: 6. With cons	No Yes. Fill in the details. scribe the property you lost and with the loss occurred List Certain Payments or Transfer thin 1 year before you filed for bankrisulted about seeking bankruptcy or	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ptcy, did you or anyone else acting on your behalf pay or tran	e of your Value of property s los
5. With disa Des hove Part 7: 6. With cons	No Yes. Fill in the details. scribe the property you lost and with the loss occurred List Certain Payments or Transfer thin 1 year before you filed for bankrisulted about seeking bankruptcy or ude any attorneys, bankruptcy petition.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ptcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	e of your Value of property s los
5. With disa Des how Part 7: 6. With construction	No Yes. Fill in the details. scribe the property you lost and with the loss occurred List Certain Payments or Transfer thin 1 year before you filed for bankr sulted about seeking bankruptcy or ude any attorneys, bankruptcy petition No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ptcy, did you or anyone else acting on your behalf pay or tran preparing a bankruptcy petition? reparers, or credit counseling agencies for services required in yo	e of your Value of property s los
5. With disa Des how Part 7: 6. With cons Inclu Per Add Em	No Yes. Fill in the details. scribe the property you lost and with the loss occurred List Certain Payments or Transfer thin 1 year before you filed for bankrighted about seeking bankruptcy or ude any attorneys, bankruptcy petition. No Yes. Fill in the details. rson Who Was Paid dress that in the details and or website address.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ptcy, did you or anyone else acting on your behalf pay or transparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transparence. Description and value of any property transferred Date of the loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that insurance has paid. List loss Include the amount that loss in the lo	e of your Value of property s los nsfer any property to anyone you our bankruptcy. e payment Amount o paymen
5. With disa Des how Part 7: 6. With considered and per Addisa	No Yes. Fill in the details. scribe the property you lost and with the loss occurred List Certain Payments or Transfermin 1 year before you filed for bankrighted about seeking bankruptcy or ude any attorneys, bankruptcy petition. No Yes. Fill in the details. rson Who Was Paid dress	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ptcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpreparers. Description and value of any property transferred Description and value of any property transferred Out	e of your Value of property s los nsfer any property to anyone you our bankruptcy. e payment Amount o paymen
5. With disa Des how Part 7: 6. With considered and per Add Em Per Law 238	No Yes. Fill in the details. scribe the property you lost and with the loss occurred List Certain Payments or Transferment of the loss occurred List Certain Payments or Transferment of the loss occurred List Certain Payments or Transferment of the loss occurred No Yes before you filed for bankred about seeking bankruptcy or ude any attorneys, bankruptcy petition No Yes. Fill in the details. It is not work the loss of	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ptcy, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpreparers. Description and value of any property transferred Description and value of any property transferred Out	e of your Value of property s los Insfer any property to anyone you our bankruptcy. E payment ransfer was paymen de

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.							
	Person Who Was Paid Address	Description and v	ralue of any prop	perty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already No Yes. Fill in the details.	isiness or financial affa de as security (such as	airs? the granting of a					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr			any property or received or debts schange	Date transfer was made		
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.							
	Name of trust	Description and v	alue of the prop	erty transfer	red	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and Sto	orage Units				
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.							
	Name of Financial Institution and	Last 4 digits of	Type of accoun		ate account was	Last balance		
	Address (Number, Street, City, State and ZIP Code)	account number	instrument	me	osed, sold, oved, or ansferred	before closing or transfer		
21.	Do you now have, or did you have within 1 yeash, or other valuables? No Yes. Fill in the details.	ear before you filed for	r bankruptcy, an	y safe depos	it box or other deposi	itory for securities,		
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy No							
	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Tunicia L Ross Case number (if known) 15-56893-tjt

Par	t 9:	Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone.				r, or hold in trust				
		■ No □ Yes. Fill in the details.							
		wner's Name ddress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value			
Par	t 10	Give Details About Environmental Inform	ation						
For	the	purpose of Part 10, the following definitions	apply:						
	tox	vironmental law means any federal, state, or ic substances, wastes, or material into the a julations controlling the cleanup of these su	ir, land, soil, surface water, groun	_	•				
		e means any location, facility, or property as own, operate, or utilize it, including disposal		law,	, whether you now own, operate,	or utilize it or use			
		zardous material means anything an environ zardous material, pollutant, contaminant, or		s wa	ste, hazardous substance, toxic	substance,			
Rep	ort	all notices, releases, and proceedings that y	ou know about, regardless of whe	n the	ey occurred.				
24.	Ha	s any governmental unit notified you that you	u may be liable or potentially liable	e un	der or in violation of an environm	ental law?			
		No Yes. Fill in the details.							
		ame of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Ha	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
		ame of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Ha	ve you been a party in any judicial or admini	strative proceeding under any env	iron	mental law? Include settlements	and orders.			
		No Yes. Fill in the details.							
		ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11	: Give Details About Your Business or Con	nections to Any Business						
27.	7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP)					y business?			
		☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Del	otor 1 Tunicia L Ross	C	ase number (if known) 15-56893-tjt					
	■ No. None of the above applies. Go to I	Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.					
	, , , , ,	Name of accountant of bookkeeper	Dates business existed					
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						
Par	t 12: Sign Below							
are with		false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.					
/s/	Tunicia L Ross							
	nicia L Ross nature of Debtor 1	Signature of Debtor 2						
Dat	e November 19, 2015	Date						
Did ■ N	•	ent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?					
I	you pay or agree to pay someone who is not lot lot. The second s							